



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

We Protect Hoosiers and Our Environment.

Mitchell E. Daniels, Jr.

Governor

Thomas W. Easterly

Commissioner

December 22, 2008

100 North Senate Avenue
Indianapolis, Indiana 46204
(317) 232-8603
Toll Free (800) 451-6027
www.idem.IN.gov

VIA CERTIFIED MAIL 7002 0510 0002 7966 0003

Mr. Steve Hastings
Becker Landscape
3749 North Kitley Avenue
Indianapolis, Indiana 46226

Re: Inspection Summary Letter
Becker Landscape Facility
Indianapolis, Marion County

Dear Mr. Hastings:

On November 21, 2008, a representative of the Indiana Department of Environmental Management, Office of Water Quality, conducted an inspection of Becker Landscape, located in Indianapolis, Indiana. This inspection was conducted pursuant to IC 13-14-2-2. For your information, and in accordance with IC 13-14-5, a summary of the inspection is provided below:

Type of Inspection: Complaint Investigation

Results of Inspection: ☒ No violations were observed.
☐ Additional information/review is required to evaluate overall compliance.
☐ Potential problems were discovered or observed.

A copy of the Notice of Inspection is enclosed for your records. Please direct any response to this letter and any questions to Andy Schmidt at 317/233-2477 or by email to atschmid@idem.IN.gov.

Sincerely,

Donald R. Daily, Inspections Section Chief
Compliance Branch
Office of Water Quality

Enclosure



NPDES FACILITY NOTICE OF INSPECTION

State Form 47989 (R6 / 5-06)

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

Facility and Inspection Information															
NPDES Permit #: N/A 11/24	Facility Type Code: <table border="0"><tr><td><input type="checkbox"/> 1 = Municipality</td><td><input type="checkbox"/> 2 = Industry/Semi-Public</td><td><input type="checkbox"/> Major</td></tr><tr><td><input type="checkbox"/> 3 = Agricultural</td><td><input type="checkbox"/> 4 = State/Federal</td><td><input type="checkbox"/> Minor</td></tr></table>		<input type="checkbox"/> 1 = Municipality	<input type="checkbox"/> 2 = Industry/Semi-Public	<input type="checkbox"/> Major	<input type="checkbox"/> 3 = Agricultural	<input type="checkbox"/> 4 = State/Federal	<input type="checkbox"/> Minor	Classification Per Permit: N/A						
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This is to notify you that on 11/24/2008 (month, day, year), an inspection of the specified facility was conducted by the undersigned representative of the Indiana Department of Environmental Management, Office of Water Quality.															
TYPE OF INSPECTION (may include more than one): <table border="0"><tr><td><input type="checkbox"/> Compliance Evaluation Inspection (C)</td><td><input checked="" type="checkbox"/> Complaint (J)</td></tr><tr><td><input type="checkbox"/> Reconnaissance Inspection (R)</td><td><input type="checkbox"/> Multi-media Screening Evaluation (M)</td></tr><tr><td><input type="checkbox"/> Industrial User Inspection (I)</td><td><input type="checkbox"/> Combined Sewer Overflow Inspection (Y)</td></tr><tr><td><input type="checkbox"/> Sanitary Sewer Overflow Inspection (V)</td><td><input type="checkbox"/> Compliance Sampling Inspection (S)</td></tr><tr><td></td><td><input type="checkbox"/> Other =</td></tr></table>		<input type="checkbox"/> Compliance Evaluation Inspection (C)	<input checked="" type="checkbox"/> Complaint (J)	<input type="checkbox"/> Reconnaissance Inspection (R)	<input type="checkbox"/> Multi-media Screening Evaluation (M)	<input type="checkbox"/> Industrial User Inspection (I)	<input type="checkbox"/> Combined Sewer Overflow Inspection (Y)	<input type="checkbox"/> Sanitary Sewer Overflow Inspection (V)	<input type="checkbox"/> Compliance Sampling Inspection (S)		<input type="checkbox"/> Other =				
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	<input type="checkbox"/> Other =														
Name and Location of Facility Inspected: (number, street, city, zip code) Becker Landscape 3749 Nort Kitley Avenue Indianapolis County: Marion		Receiving Waters/POTW: Roadside ditch	Permit Expiration Date: N/A												
Name(s) of On-Site Representatives: Mr. Steve Hastings		Title(s): Operations	Phone: 317-542-5200 Fax: 317-542-5202												
Certified Operator: N/A	Number: N/A Renewal Effective Date: N/A	Class: N/A Expiration Date: N/A	Full Time: <input type="checkbox"/> Part Time: <input type="checkbox"/> Hours per Week: N/A												
Name and Address of Responsible Official: (number, street, city, zip code) Mr. Steve Hastings Becker Landscape 3749 North Kitley Avenue Indianapolis, Indiana 46226		Title: Operations Contacted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Phone: 317-542-5200 Fax: Facility Design Flow: N/A												
Areas Evaluated During Inspection (S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated, NA = Not Applicable)															
<input type="checkbox"/> N Receiving Waters Appearance	<input type="checkbox"/> N Facility/Site	<input type="checkbox"/> N Self-Monitoring Program	<input type="checkbox"/> N Compliance Schedules												
<input type="checkbox"/> N Effluent Appearance	<input type="checkbox"/> N Operation	<input type="checkbox"/> N Flow Measurement	<input type="checkbox"/> N Pretreatment												
<input type="checkbox"/> N Permit	<input type="checkbox"/> N Maintenance	<input type="checkbox"/> N Laboratory	<input type="checkbox"/> N Effluent Limits Violations												
<input type="checkbox"/> N CSO/SSO (Sewer Overflow)	<input type="checkbox"/> N Sludge Disposal	<input type="checkbox"/> N Records/Reports	<input type="checkbox"/> S Other: Complaint												
Preliminary Inspection/Screening Findings*															
*These findings are considered preliminary and identify specific compliance issues discovered during the above-noted inspection that the designated agent of IDEM believes may be a violation of a statute(s), rule(s) or permit(s) issued by IDEM.															
SINGLE MEDIA INSPECTION: <table border="0"><tr><td><input checked="" type="checkbox"/></td><td>No violations were discovered with respect to the particular items observed during the inspection. (5)</td></tr><tr><td><input type="checkbox"/></td><td>Violations were discovered but corrected during the inspection. (4)</td></tr><tr><td><input type="checkbox"/></td><td>Violations were discovered and require a submittal from you and/or follow-up inspection by IDEM. (2)</td></tr><tr><td><input type="checkbox"/></td><td>Violations were discovered and may subject you to an appropriate enforcement response. (1)</td></tr><tr><td><input type="checkbox"/></td><td>Additional information/review is required to evaluate overall compliance. (6)</td></tr><tr><td><input type="checkbox"/></td><td>Potential problems were discovered or observed. (3)</td></tr></table>				<input checked="" type="checkbox"/>	No violations were discovered with respect to the particular items observed during the inspection. (5)	<input type="checkbox"/>	Violations were discovered but corrected during the inspection. (4)	<input type="checkbox"/>	Violations were discovered and require a submittal from you and/or follow-up inspection by IDEM. (2)	<input type="checkbox"/>	Violations were discovered and may subject you to an appropriate enforcement response. (1)	<input type="checkbox"/>	Additional information/review is required to evaluate overall compliance. (6)	<input type="checkbox"/>	Potential problems were discovered or observed. (3)
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Comments Regarding Ratings – Including Rule or Permit Citation(s): A complainant had reported that the facility was discharging contaminated runoff into a ditch at the rear of the property. At the site, the facility grounds was inspected as well as the ditch at the rear of the property and no evidence of contaminated runoff or any other potential problem was noted.															

Additional Comments Regarding Ratings:

Multi-Media Screening (please note that a multi-media screening is not a comprehensive evaluation of the compliance status of the facility):

- ☒ Multi-media screening not conducted.
- ☐ No violations were observed during the limited multi-media screening conducted by IDEM.
- ☐ Potential violations were discovered but corrected during the inspection.
- ☐ Potential problems were discovered and may be further investigated.

Pollution Prevention

Pollution prevention is the preferred means of environmental protection in Indiana. The goal of pollution prevention is to promote changes in business and commercial operation, especially manufacturing processes, so that Indiana businesses increase productivity, generate less environmental wastes, reduce their regulatory responsibilities and become more profitable. Your participation in Indiana's pollution prevention program is entirely voluntary. If you have any pollution prevention questions, you may contact our Office of Pollution Prevention and Technical Assistance (OPPTA) at (317) 232-8172 or (800) 988-7901, or visit OPPTA's Web site at www.idem.IN.gov/oppta/p2/. Would your company like to be contacted by IDEM's Office of Pollution Prevention and Technical Assistance?

☐ Yes ☒ No

Compliance Assistance

In addition to the compliance assistance offered by IDEM's individual programs, IDEM's Compliance and Technical Assistance Program (CTAP) offers free, confidential compliance assistance to regulated entities, including small businesses and municipalities, throughout Indiana. In the future, if you would like to request free, confidential compliance assistance, call (317) 232-8172 or (800) 988-7901, or visit CTAP's Web site at <http://www.idem.IN.gov/ctap/>.

Summary and Correction Information

A summary of violations and concerns noted during the inspection was verbally communicated to the undersigned representative during the inspection. The facility should correct any violations noted as soon as possible. Violations identified and corrected during the inspection may still be cited as violations.

- ☒ A written inspection summary will be provided within 45 days.
In accordance with IC 13-14-5-4, matters not evident to IDEM at the time of the inspection might not be included in either the verbal or written inspection summary.
- ☐ Written report provided at the conclusion of the inspection.
If upon subsequent review, any changes to this report are deemed necessary, a revised report will be sent to the subject facility within 45 days.


IDEM Representative:

Printed Name:	Signature:	Phone Number:	Date:	Time
Andy Schmidt		317-233-2477	11/21/2008	In: 11:45am Out: 12:45pm

Owner/Agent Representative/Title:

Printed Name:	Signature:	Title:	Phone Number:	Date:

For IDEM Internal Use:

Section Chief or Regional Deputy Director:	Date:	For:
	12/15/08	<input type="checkbox"/> Follow-up <input type="checkbox"/> NPDES Permits
		<input type="checkbox"/> Enforcement <input type="checkbox"/> Other

IDEM	INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF WATER MANAGEMENT Complaint Investigation Report	100 NORTH SENATE AVENUE INDIANAPOLIS, IN 46204
General Information		
Name of Alleged Responsible Party: Becker Landscape		Date Reported: 9-26-08
Address and Directions 3749 North Kitley		County: Marion
		Receiving Stream: Un-named ditch
Received by: <input type="checkbox"/> RRR; <input type="checkbox"/> RLP; <input type="checkbox"/> RAC; <input type="checkbox"/> Cler.; <input type="checkbox"/> Insp.; Other Specify name of Inspector, Clerical or Other: Tania M.	Via: <input checked="" type="checkbox"/> Phone; <input type="checkbox"/> Letter; <input type="checkbox"/> Person; <input type="checkbox"/> Internet; <input type="checkbox"/> Fax; <input type="checkbox"/> Referral Referred by:	
Complainant Type: <input type="checkbox"/> Individual; <input checked="" type="checkbox"/> Anonymous; <input type="checkbox"/> Public Official		Report to Complainant?: <input type="checkbox"/> Yes <input type="checkbox"/> No
Complainant's Name:		Phone Number
Address:		City:
Nature of Complaint: <input checked="" type="checkbox"/> Water Pollution; <input type="checkbox"/> NPDES Facility Failure; <input type="checkbox"/> Basement Backup; <input type="checkbox"/> Septic Tank Ponding; <input type="checkbox"/> Other		
Description of Complaint: Becker Landscape staff washing off equipment on gravel lot and contaminating a nearby stream:		
Responsible party: (To be completed by Inspector) Becker Landscape		
Address/Location: above		City:
Response		
I. First Response Date: <u>11-21-08</u> (call or visit)		
II. Investigation Date: <u>11-21-08</u>		
III. Closed Date: <u>11-21-08</u>	A. No Action Needed <input checked="" type="checkbox"/> <div style="margin-left: 20px;"> 1. No Problem Observed <input checked="" type="checkbox"/> 2. NPDES Facility Corrected <input type="checkbox"/> </div>	
	B. Referred to Other Agency: _____ <input type="checkbox"/> Contact: _____ Phone Number: _____	
	C. Compliance Action <div style="margin-left: 20px;"> 1. IS/VL Letter Date: _____ <input type="checkbox"/> 2. OATS Referral Date: _____ <input type="checkbox"/> </div>	
	D. Enforcement Referral Date: _____ <input type="checkbox"/>	
IV. Report Sent Date: _____		
COMM_XP_... # 11848		

IDEM WASTEWATER PRE-INSPECTION CHECKLIST

Name and Location of Facility to be Inspected:	NPDES Permit #:	GPS Coordinates Recorded:	Date to be Inspected:	Inspector:
Name: Becker Landscape Town/City: Indianapolis County: Marion	None	No	11-21-08	Andy Schmidt

1.	REVIEW RELEVANT PROGRAM PERMIT AND PERMIT APPLICATIONS	CHECK ONE:			
		YES	NO X	N/A	N/E
IF NO, N/A, N/E:	Provide explanation or description why: No pre-inspection file review conducted – Complaint Investigation.				
IF YES:	Info Source/ Location/Date Reviewed	Inspector Notations Pertinent to Upcoming Inspection:			

2.	REVIEW PRIOR INSPECTION HISTORY & REPORTS RELEVANT TO THE PROGRAM INSPECTION, PARTICULARLY ANY OUTSTANDING OR UNRESOLVED ISSUES.	CHECK ONE:			
		YES	NO X	N/A	N/E
IF NO, N/A, N/E:	Explanation:				
IF YES:	Info Source/Location/Date Reviewed	Inspector Notations Pertinent to Upcoming Inspection:			

3.	REVIEW PRIOR COMPLIANCE AND ENFORCEMENT HISTORY RELEVANT TO PROGRAM INSPECTION, PARTICULARLY: WARNINGS AND MINOR VIOLATIONS, FORMAL ACTIONS (OE &/OR EPA)	CHECK ONE:			
		YES	NO X	N/A	N/E
IF NO, N/A, N/E:	Explanation:				
IF YES:	Info Source/Location/Date Reviewed	Inspector Notations Pertinent to Upcoming Inspection:			

4.	REVIEW FACILITY RESPONSES TO ALL OF THE ABOVE.	CHECK ONE:			
		YES	NO X	N/A	N/E
IF NO, N/A, N/E:	Explanation:				
IF YES:	Info Source/Location/Date Reviewed	Inspector Notations Pertinent to Upcoming Inspection:			

5.	REVIEW FACILITY RECORDS, REPORTS, SELF-MONITORING DATA CURRENTLY AVAILABLE.		CHECK ONE:			
			YES	NO X	N/A	N/E
IF NO, N/A, N/E:	Explanation:					
IF YES:	Info Source/Location/Date Reviewed		Inspector Notations Pertinent to Upcoming Inspection:			

6.	REVIEW MAPS SHOWING FACILITY LAYOUT AND WASTE MANAGEMENT/ DISCHARGE SITES.		CHECK ONE:			
			YES	NO X	N/A	N/E
IF NO, N/A, N/E:	Explanation:					
IF YES:	Info Source/Location/Date Reviewed		Inspector Notations Pertinent to Upcoming Inspection:			

7.	REVIEW RECORDS OF CITIZEN'S COMPLAINTS.		CHECK ONE:			
			YES	NO X	N/A	N/E
IF NO, N/A, N/E:	Explanation:					
IF YES:	Info Source/Location/Date Reviewed		Inspector Notations Pertinent to Upcoming Inspection:			

8.	REVIEW ANY PROCESS INFORMATION.		CHECK ONE:			
			YES	NO X	N/A	N/E
IF NO, N/A, N/E:	Explanation:					
IF YES:	Info Source/Location/Date Reviewed		Inspector Notations Pertinent to Upcoming Inspection:			

9.	REVIEW AND DETERMINE APPLICABLE REQUIREMENTS.		CHECK ONE:			
			YES	NO X	N/A	N/E
IF NO, N/A, N/E:	Explanation:					
IF YES:	Info Source/Location/Date Reviewed		Inspector Notations Pertinent to Upcoming Inspection:			

ADDITIONAL COMMENTS: